



06-28-04

IPW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Michiya Katou et al. Confirmation No.: 2543
Serial No.: 10/694,341 Examiner: W. Oen
Filing Date: October 27, 2003 Group Art Unit: 2855
Docket No.: 1018.1189101 Customer No.: 28075
For: SEMICONDUCTOR SENSOR AND TRANSMITTER FOR USE IN TIRE
CONDITION MONITORING APPARATUS

TRANSMITTAL SHEET

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certified that this paper or papers, as described herein are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV 315614459 US, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 24th day of June 2004.

By Kathleen L. Boekley
Kathleen L. Boekley

We are transmitting herewith the attached:

- [] Amendment
[] No additional claim fee required
[] The claim fee has been calculated as shown:

| CLAIMS AS AMENDED | | | | | | | |
|------------------------------------|------------------|--------------|-------|--------------|-----------|---------|-----------|
| | (3) | (4) | (5) | SMALL ENTITY | | OTHER | |
| | REMAINING CLAIMS | HIGHEST PAID | EXTRA | RATE | ADD'L FEE | RATE | ADD'L FEE |
| TOTAL CLAIMS | - | = | | X 9= | \$ | X 18= | \$ |
| INDEPENDENT CLAIMS | - | = | | X 43= | \$ | X 86 = | \$ |
| () FIRST MULTIPLE DEPENDENT CLAIM | | | | + 145 = | \$ | + 290 = | \$ |
| TOTAL | | | | \$ | | \$ | |

[] A check in the amount of \$_____ is enclosed. Itemization:

Fee Code _____ \$

Fee Code _____ \$

Fee Code _____ \$

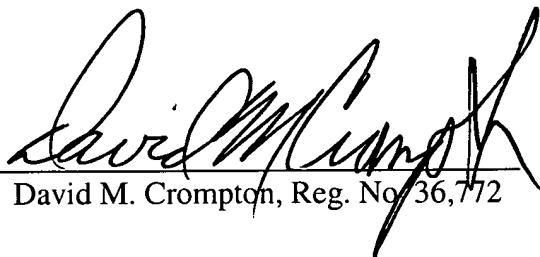
[] Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established.

[XX] Other: CHANGE OF CORRESPONDENCE ADDRESS IN APPLICATION, INFORMATION DISCLOSURE STATEMENT, CERTIFICATION FOR INFORMATION DISCLOSURE STATEMENT (37 C.F.R. § 1.97(e)(1)), FORM PTO-1449, AND TWO CITED NON-U.S. PATENT/PUBLICATION REFERENCES.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By:


David M. Crompton, Reg. No. 36,772

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